

Margaret M. Fox

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February 1, 2016

Ms. Jocelyn Boyd Chief Clerk and Administrator South Carolina Public Service Commission Synergy Business Park, The Saluda Building 101 Executive Center Drive Columbia, South Carolina 29210

Re: Annual Lifeline Customer Recertification: FCC Form 555

Dear Ms. Boyd:

Enclosed for filing on behalf of the South Carolina Telephone Coalition companies and affiliated eligible telecommunications carriers ("ETCs") (see attached list), please find a copy of FCC Form 555. Federal Communications Commission ("FCC") regulations require all ETCs to file FCC Form 555 on an annual basis with the FCC, the Administrator of the Universal Service Administrative Company ("USAC"), and the relevant state commission to report the results of their annual Lifeline Customer Recertifications. *See* 47 C.F.R. § 54.416.

While the FCC rules state that a copy of these results must be provided to the state commission, the Commission is not required or asked to take any action at this time. Therefore, we are providing these forms for information purposes only. We are also providing a copy to the Office of Regulatory Staff, as Administrator of the Lifeline program in South Carolina.

Thank you for your assistance. If you should have any questions, please do not hesitate to contact me.

Very truly yours,

McNAIR LAW FIRM, P.A. Margnet H. Teer

Margaret M. Fox

MMF:dmf Enclosures

cc:

Christopher Rozycki, Director - Telecommunications, ORS

McNAIR LAW FIRM, P.A.

1221 Main Street Suite 1600 Columbia, SC 29201

Mailing Address Post Office Box 11390 Columbia, SC 29211

mcnair.net

South Carolina Telephone Coalition Member Companies and Affiliated ETCs

Bluffton Telephone Company, Inc.

Chesnee Telephone Company

Chester Telephone Company, d/b/a TruVista

Comporium, Inc. (f/k/a Rock Hill Telephone Company)

Farmers Telephone Cooperative, Inc.

FTC Communications LLC

Ft. Mill Telephone Company, d/b/a Comporium

Hargray Telephone Company, Inc.

Home Telephone ILEC, LLC d/b/a Home Telecom

Horry Telephone Cooperative, Inc.

Lancaster Telephone Company, d/b/a Comporium

Lockhart Telephone Company, d/b/a TruVista

McClellanville Telephone Company (TDS)

Norway Telephone Company (TDS)

Palmetto Rural Telephone Cooperative, Inc.

Palmetto Telephone Communications

Piedmont Rural Telephone Cooperative, Inc.

PBT Telecom, d/b/a Comporium

Ridgeway Telephone Company, d/b/a TruVista

Sandhill Telephone Cooperative, Inc.

St. Stephen Telephone Company (TDS)

West Carolina Rural Telephone Cooperative, Inc.

Williston Telephone Company (TDS)

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

240512	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a cer	rtification form for each SAC through which it provides Lifeline service).
SC	Bluffton Telephone Company
State	ETC Name
Hargray	Hargray Communications Group, Inc.
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No O
Provide a list of all ETCs that are affiliated with the reporting ETC, determined in accordance with Section 3(2) of the Communications 2 owns or controls, is owned or controlled by, or is under common own C.F.R. § 76.1200.	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
See attached worksheet	
formation, or other similar legal document. An officer is laws (or partnership agreement), and would typically be r	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	this section
I certify that the company listed above has certification pro	ocedures in place to:
A) Review income and program-based eligibility docume that, to the best of my knowledge, the company wa income and/or program-based eligibility prior to his or	ntation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon access Lifeline administrator prior to enrolling a consumer in	s to a state database and/or notice of eligibility from the state the Lifeline program.
I am an officer of the company named above. I am auth	norized to make this certification for the Study Area Code listed
Initial DA	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
48	0	2	5	41

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
41	31	10	0	10

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial DA

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
	Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
41	10	24.4%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 🚺

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is	s in compliance with all federal Lifeline certification
procedures. I am an officer of the company named above.	. I am authorized to make this certification for the
Study Area Code (SAC) listed above.	
3,000 (3,100 (3,100)	

Signed,

Certified Online

Signature of Officer

david.armistead@htc.hargray.com

Email Address of Officer

Person Completing This Certification Form

David Armistead, GC & Sec

Printed Name and Title of Officer
01/20/2016
Date

Contact Phone Number

SAC	Name
240523	Hargray Telephone Co, Inc.
6	

All carriers must complete all or portions of all sections

Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

240515 Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a cer	rification form for each SAC through which it provides Lifeline service).
South Carolina	Chesnee Telephone Company
State	ETC Name
Chesnee Communications DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	N/A Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No X
Provide a list of all ETCs that are affiliated with the reporting ETC, a determined in accordance with Section 3(2) of the Communications A owns or controls, is owned or controlled by, or is under common own C.F.R. § 76.1200.	using page 4 and additional sheets if necessary. Affiliation shall be let. That Section defines "affiliate" as "a person that (directly or indirectly) are ship or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
Not Applicable	Not Applicable

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Section 1: Initial Certification All ETCs must complete this section

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial HAL

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
164	0	4	15	143

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
145	128	17	2	19

K	L		
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC		
0	0		

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:						
	(List database or name of administrator here)						
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the						
	SAC listed above.						
	Initial						

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial ______

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

M = (F+K)	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
143	21	15%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is	the ETC	Pre-Paid?	Yes [] No	Х
13	uic Dic	I I C.I MICH	100		

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	
February	
March	
April	
May	
June	V - 1001/-
July	
August	
September	
October	
November	
December	
Total Subscribers	

Signature Block

By signing	below, l	certify that	the company	listed above i	s in cor	mpliance w	ith all fed	leral Lifeline	certification
				named above	e. I am	authorized	i to make	this certific	ation for the
Study Area	Code (S	SAC) listed a	above.						

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Sig	nature c	f Officer	_ /	(
1.50		7005 70		1		

hannahl@chesnet.net

Email Address of Officer

Tanea Davis Foglia

Person Completing This Certification Form

Hanı	nah	Lar	cast	er	President
Printed	Name	e and	Title o	rom	ісет

-		
	01/20/16	

Date

301-495-3083

Contact Phone Number

SAC	Name
SAC	Name
<u> </u>	
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All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

240516	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a ce	rtification form for each SAC through which it provides Lifeline service).
SC	Chester Telephone Company
State	ETC Name
TruVista	'N/A'
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No O
Provide a list of all ETCs that are affiliated with the reporting ETC, determined in accordance with Section 3(2) of the Communications a owns or controls, is owned or controlled by, or is under common own C.F.R. § 76.1200.	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
See attached worksheet	
formation, or other similar legal document. An officer is laws (or partnership agreement), and would typically be p	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete t	his section
I certify that the company listed above has certification pro	ocedures in place to:
A) Review income and program-based eligibility document that, to the best of my knowledge, the company wa income and/or program-based eligibility prior to his or	ntation prior to enrolling a consumer in the Lifeline program, and is presented with documentation of each consumer's household ther enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon access Lifeline administrator prior to enrolling a consumer in	s to a state database and/or notice of eligibility from the state the Lifeline program.
I am an officer of the company named above. I am authorabove.	orized to make this certification for the Study Area Code listed
Initial	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled prior to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
322	0	34	27	261

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
261	155	106	0	106

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block F

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial TTH

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial ———

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

M = (F+K)	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
261	106	40.62%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 🔘

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Signature of Officer

tharper@truvista.biz

Email Address of Officer

Swonda M. Dixon

Person Completing This Certification Form

Thomas T. Harper / VP Administration & Regulatory

Affairs

Printed Name and Title of Officer

7/

803-581-9172

Contact Phone Number

SAC	Name	
240532	Lockhart Telephone Company	
240541	Ridgeway Telephone Company	
		-1110
	-IV	

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provi	de a certification form for each SAC through which it provides Lifeline service).	
SC	Comporium Inc.	
State	ETC Name	
Comporium	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)	
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)		
etermined in accordance with Section 3(2) of the Communication	Cs? Yes No No No No No No No No No N	
Provide a list of all ETCs that are affiliated with the reporting etermined in accordance with Section 3(2) of the Communications or controls, is owned or controlled by, or is under comm	ETC, using page 4 and additional sheets if necessary. Affiliation shall be attended to the state of the state	

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate bylaws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Section 1: Initial Certification All ETCs must complete this section

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial	mld

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled prior to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
619	0	84	48	487

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
487	198

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its
Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all
subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F
through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed
above.
W. A.A. A.

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

LISAC

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial mld

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
487	198	40.66%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 🔘

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Certified Online

Signature of Officer

matt.dosch@comporium.com

Email Address of Officer

Tara Thomas

Person Completing This Certification Form

Matthew L. Dosch EVP Customer Oper & Ext Affairs

Printed Name and Title of Officer

01/28/2016

Date

803-326-6501

Contact Phone Number

SAC	Name
240521	Fort Mill Telephone Company
240531	Lancaster Telephone Company
230473	Citizens Telephone Company
240539	PBT Telecom Inc.
240339	PB1 Telecom Inc.

1	

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

240520	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a ce	rtification form for each SAC through which it provides Lifeline service).
SC	Farmers Telephone Cooperative Inc.
State	ETC Name
FTC	Farmers Telephone Cooperative, Inc.
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs? Provide a list of all ETCs that are affiliated with the reporting ETC,	Yes No No Our No Desire page 4 and additional sheets if necessary. Affiliation shall be
determined in accordance with Section 3(2) of the Communications.	Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
See attached worksheet	
formation, or other similar legal document. An officer is laws (or partnership agreement), and would typically be to	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance er is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	this section
I certify that the company listed above has certification pro	ocedures in place to:
A) Review income and program-based eligibility docume that, to the best of my knowledge, the company wa income and/or program-based eligibility prior to his or	ntation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon access Lifeline administrator prior to enrolling a consumer in	s to a state database and/or notice of eligibility from the state the Lifeline program.
I am an officer of the company named above. I am authabove.	norized to make this certification for the Study Area Code listed
Initial JLL	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	E = (A - B - C - D)
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
710	0	69	111	530

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
530	269	261	0	261

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block F

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial JLL

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
,	Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial ———

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial ______

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

M = (F+K) Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	N = (J+L) Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	O = ((N ÷ M) * 100) Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
530	261	49.25%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes O

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
une	0
uly	0
ugust	0
eptember	0
October	0
Vovember	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,
Certified Online
Signature of Officer
jeff lawrimore@ftc.org
Email Address of Officer
Sandra Moore
Person Completing This Certification Form

Jeffrey L Lawrimore CFO

Printed Name and Title of Officer
01/26/2016
Date
843-382-1313
Contact Phone Number

SAC	Name
249002	FTC Communications LLC
217002	TIC COMMINATION THE PROPERTY OF THE PROPERTY O

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

FTC Communications LLC ETC Name Farmers Telephone Cooperative, Inc. Holding Company Name (If same as ETC name, list "N/A" Do not leave blank) Yes No No ing page 4 and additional sheets if necessary. Affiliation shall be . That Section defines "affiliate" as "a person that (directly or indirectly) riship or control with, another person." 47 U.S.C. § 153(2). See also 47
ETC Name Farmers Telephone Cooperative, Inc. Holding Company Name (If same as ETC name, list "N/A" Do not leave blank) Yes No No Ing page 4 and additional sheets if necessary. Affiliation shall be That Section defines "affiliate" as "a person that (directly or indirectly).
Farmers Telephone Cooperative, Inc. Holding Company Name (If same as ETC name, list "N/A" Do not leave blank) Yes No No Ing page 4 and additional sheets if necessary. Affiliation shall be That Section defines "affiliate" as "a person that (directly or indirectly)
Holding Company Name (If same as ETC name, list "N/A" Do not leave blank) Yes No
Yes
ing page 4 and additional sheets if necessary. Affiliation shall be That Section defines "affiliate" as "a person that (directly or indirectly).
ffiliated ETC's Name
illimated 210 b 1 tanks
a position listed in the article of incorporation, articles a person who occupies a position specified in the corporate by sident, vice president for operations, vice president for financies a sole proprietorship, the owner must sign the certification.

A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
 B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state

Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial	GDA
---------	-----

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
12	0	1	4	7

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
7	3	4	0	4

К	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block F

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial GDA

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
,	Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

		Y
$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
7	4	57.15%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 🔼

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q	
Month	Subscribers De-Enrolled for Non-Usage	
January	0	
February	0	
March	0	
April	0	
May	0	
June	0	
July	0	
August	0	
September	0	
October	0	
November	0	
December	0	
Total Subscribers	0	

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,
Certified Online
Signature of Officer
adamsd@ftc.org
Email Address of Officer
Sandra Moore
Person Completing This Certification Form

Guy Dent Adams, Jr COO Subsidiaries

Printed Name and Title of Officer
01/26/2016

Date
843-382-1313

Contact Phone Number

SAC	Name
240520	Farmers Telephone Cooperative Inc.
240320	Turning Total Control Control Control
	· ·

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

Study Area Code (SAC)	I
	de a certification form for each SAC through which it provides Lifeline service).
SC	Fort Mill Telephone Company
State	ETC Name
Comporium	Comporium, Inc
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
ermined in accordance with Section 3(2) of the Communica	ETC, using page 4 and additional sheets if necessary. Affiliation shall be ations Act. That Section defines "affiliate" as "a person that (directly or indirectly on ownership or control with, another person." 47 U.S.C. § 153(2). See also 47
filiated ETC's SAC	Affiliated ETC's Name
Illiated LTC 8 BAC	

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate bylaws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Section 1: Initial Certification All ETCs must complete this section

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial	mld

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero,

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
93	0	21	6	66

Recertification Results:

F	G	H = (F-G)	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
66	29

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A .)	I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its
	Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all
	subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F
	through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed
	above.
	Y 6,0 3

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

LISAC

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial mld

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February
Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am

authorized to make this certification for the SAC listed above. **Initial** _____

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
66	29	43.94%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes O

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,
Certified Online
Signature of Officer
matt.dosch@comporium.com
Email Address of Officer

Tara Thomas

Person Completing This Certification Form

Matthew L. Dosch EVP Customer Oper & Ext Affairs

Printed Name and Title of Officer
01/28/2016

Date
803-326-6501

Contact Phone Number

SAC	Name
240542	Comporium Inc.
240531	Lancaster Telephone Company
230473	Citizens Telephone Company
240539	PBT Telecom Inc.
240339	TB1 Telecom me.
3-111-11	
10-10	

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

240523	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a cer	rtification form for each SAC through which it provides Lifeline service).
SC	Hargray Telephone Co. Inc.
State	ETC Name
Hargray	Hargray Communications Group, Inc.
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No No
Provide a list of all ETCs that are affiliated with the reporting ETC, letermined in accordance with Section 3(2) of the Communications as was or controls, is owned or controlled by, or is under common own C.F.R. § 76.1200.	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
- See attached worksheet	
formation, or other similar legal document. An officer is aws (or partnership agreement), and would typically be promptroller, treasurer, or a comparable position. If the file	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	
certify that the company listed above has certification pro-	
A) Review income and program-based eligibility docume that, to the best of my knowledge, the company we income and/or program-based eligibility prior to his or	ntation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon acces Lifeline administrator prior to enrolling a consumer in	s to a state database and/or notice of eligibility from the state the Lifeline program.
I am an officer of the company named above. I am authabove.	norized to make this certification for the Study Area Code listed
Initial DA	

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers dld not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
53	0	3	8	42

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
42	28	14	0	14

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block F

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial DA ____

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
	Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial ———

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

M = (F+K)	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
42	14	33.34%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 🔼

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block $\mathcal Q$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company li-	isted above is in	compliance with	all federal	Lifeline certi	fication
procedures. I am an officer of the company n	named above. I	am authorized to	make this	certification	for the
Study Area Code (SAC) listed above.					

	David Armistead, GC & Sec
Signed,	
Certified Online	-
Signature of Officer	Printed Name and Title of Officer
david.armistead@htc.hargray.com	01/20/2016
Email Address of Officer	Date
Person Completing This Certification Form	Contact Phone Number

SAC	Name	
240512	Bluffton Telephone Company	
410014		

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

240527	
Study Area Code (SAC)	certification form for each SAC through which it provides Lifeline service).
SC	Home Telephone ILEC LLC
State	ETC Name
N/A	N/A
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
determined in accordance with Section 3(2) of the Communication	C, using page 4 and additional sheets if necessary. Affiliation shall be as Act. That Section defines "affiliate" as "a person that (directly or indirectly) ownership or control with, another person." 47 U.S.C. § 153(2). See also 47 Affiliated ETC's Name
All mated ETC 8 SAC	Attituded ETC 3 Name
formation, or other similar legal document. An officer laws (or partnership agreement), and would typically be	nt of a position listed in the article of incorporation, articles of is a person who occupies a position specified in the corporate by- e president, vice president for operations, vice president for finance, filer is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	te this section
I certify that the company listed above has certification p	procedures in place to:
A) Review income and program-based eligibility documenthat, to the best of my knowledge, the company of	nentation prior to enrolling a consumer in the Lifeline program, and was presented with documentation of each consumer's household

B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
352	0	3	53	296

Recertification Results:

F	G	H = (F-G)	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
338	171	167	0	167

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial DVT

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____

Section 3: De-enroll Percentage

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
338	167	49.41%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 👩

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in $Block\ Q$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Certified Online

Signature of Officer

Denny.Thompson@hometelco.com

Email Address of Officer

Denny Thompson

Person Completing This Certification Form

Director Administrative Service

Printed Name and Title of Officer

01/28/2016

Date

843-761-9101

Contact Phone Number

Initial CL

Annual Lifeline Eligible Telecommunications Carrier Certification Form
All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

240528	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a	certification form for each SAC through which it provides Lifeline service).
SC	Horry Telephone Cooperative Inc.
State	ETC Name
N/A	N/A
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes 👩 No 👩
determined in accordance with Section 3(2) of the Communication	C, using page 4 and additional sheets if necessary. Affiliation shall be ns Act. That Section defines "affiliate" as "a person that (directly or indirectly) ownership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
formation, or other similar legal document. An office laws (or partnership agreement), and would typically b	nt of a position listed in the article of incorporation, articles of r is a person who occupies a position specified in the corporate bye president, vice president for operations, vice president for finance, filer is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must comple	ete this section
I certify that the company listed above has certification	procedures in place to:
A) Review income and program-based eligibility documents, to the best of my knowledge, the company income and/or program-based eligibility prior to his	mentation prior to enrolling a consumer in the Lifeline program, and was presented with documentation of each consumer's household or her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon acc Lifeline administrator prior to enrolling a consumer	cess to a state database and/or notice of eligibility from the state in the Lifeline program.
I am an officer of the company named above. I am at above.	uthorized to make this certification for the Study Area Code listed

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

Manager Alexander	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
602	0	43.	89	470

Recertification Results:

	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
470	364	106	11	117

K K	
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial CL

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:				
		. Results ar	re provided in	n the chart	above in
	Blocks K through L.	I am an officer of the company named above. I am authorize	ized to make th	nis certification	on for the
	SAC listed above.				

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

Section 3: De-enroll Percentage

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
470	117	24.9%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes: O

No 🗿

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	
March	0
April	0
May	0.
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,	
Certified Online	
Signature of Officer	
carlton.lewis@htcinc.r	net
Email Address of Officer	
Joni Jordan	TRANSPORT CIPTOR
Barron Completing This Cer	tification Form

Carlton Lewis CFO

Printed Name and Title of Officer
01/28/2016
Date
843-365-2151
Contact Phone Number

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

240531	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide	le a certification form for each SAC through which it provides Lifeline service).
SC	Lancaster Telephone Company
State	ETC Name
Comporium	Comporium, Inc
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
ermined in accordance with Section 3(2) of the Communica	Cs? Yes No No Security No Security No Security No Security No No Security No Security No. 12 (Security No. 12) No Security No. 12 (Security No. 12) No. 12 (Security No. 12
evide a list of all ETCs that are affiliated with the reporting ermined in accordance with Section 3(2) of the Communicans or controls, is owned or controlled by, or is under comm	ETC, using page 4 and additional sheets if necessary. Affiliation shall be ations Act. That Section defines "affiliate" as "a person that (directly or indirectly

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate bylaws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Section 1: Initial Certification All ETCs must complete this section

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial	mld	
---------	-----	--

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
512	0	141	37	334

Recertification Results:

F	G	H = (F-G)	ĭ	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
334	129

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Initial

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____ AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

USAC

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial mld

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Section 3: De-enroll Percentage

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
334	129	38.63%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 🔘

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q Subscribers De-Enrolled for Non-Usage	
Month		
January	0	
February	0	
March	0	
April	0	
May	0	
June	0	
July	0	
August	0	
September	0	
October	0	
November	0	
December	0	
Total Subscribers	0	

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Certified Online

Signature of Officer

matt.dosch@comporium.com

Email Address of Officer

Tara Thomas

Person Completing This Certification Form

Matthew L. Dosch EVP Customer Oper & Ext Affairs

Printed Name and Title of Officer

01/28/2016

Date

803-326-6501

Contact Phone Number

SAC	Name
240542	Comporium Inc.
240521	Fort Mill Telephone Company
230473	Citizens Telephone Company
240539	PBT Telecom Inc.
240337	

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

240532	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a	certification form for each SAC through which it provides Lifeline service).
SC	Lockhart Telephone Company
State	ETC Name
TruVista	Chester Telephone Company
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No No O
letermined in accordance with Section 3(2) of the Communication	s Act. That Section defines "affiliate" as "a person that (directly or indirectly) with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
- See attached worksheet	
ormation, or other similar legal document. An officer	at of a position listed in the article of incorporation, articles of is a person who occupies a position specified in the corporate by-president, vice president for operations, vice president for finance, iller is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complet	e this section
certify that the company listed above has certification p	procedures in place to:
A) Review income and program-based eligibility documenthat, to the best of my knowledge, the company vincome and/or program-based eligibility prior to his company to his company with the company was also believed the company with the company was also believed to the company with the company was also believed to the company was a	mentation prior to enrolling a consumer in the Lifeline program, and was presented with documentation of each consumer's household or her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon acce	ess to a state database and/or notice of eligibility from the state

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed

Lifeline administrator prior to enrolling a consumer in the Lifeline program.

Initial TTH

above.

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
4	0	0	0	4

Recertification Results:

F	G	H = (F-G)	I	$\mathbf{J} = (\mathbf{H} + \mathbf{I})$
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
4	2	2	0	2

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block F

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial TTH

AND/OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

OR

Section 3: De-enroll Percentage

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
4	2	50.0%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 🔘

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q	
Month	Subscribers De-Enrolled for Non-Usage	
January	0	
February	0	
March	0	
April	0	
May	0	
June	0	
July	0	
August	0	
September	0	
October	0	
November	0	
December	0	
Total Subscribers	0	

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Certified Online

Signature of Officer

tharper@truvista.biz

Email Address of Officer

Swonda M. Dixon

Person Completing This Certification Form

Thomas T. Harper / VP
Administration & Regulatory
Affairs
Printed Name and Title of Officer
01/27/2016
Date

803-581-9164

Contact Phone Number

SAC	Name
240516	Chester Telephone Company

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

South Carolina	McClellanville Telephone Co.
State	ETC Name
TDS Telecom; TDS	TDS Telecommunications Corporation
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
rovide a list of all ETCs that are affiliated with the reporting etermined in accordance with Section 3(2) of the Communi wns or controls, is owned or controlled by, or is under com	ng ETC, using page 4 and additional sheets if necessary. Affiliation shall be ications Act. That Section defines "affiliate" as "a person that (directly or indirectly) amon ownership or control with, another person." 47 U.S.C. § 153(2). See also 47
rovide a list of all ETCs that are affiliated with the reporting termined in accordance with Section 3(2) of the Communitions or controls, is owned or controlled by, or is under community. F.R. § 76.1200.	ng ETC, using page 4 and additional sheets if necessary. Affiliation shall be lightness "affiliate" as "a person that (directly or indirectly)
Istonician dia accordance with Section 3(2) of the Communi	ng ETC, using page 4 and additional sheets if necessary. Affiliation shall be ications Act. That Section defines "affiliate" as "a person that (directly or indirectly) amon ownership or control with, another person." 47 U.S.C. § 153(2). See also 47
rovide a list of all ETCs that are affiliated with the reporting elermined in accordance with Section 3(2) of the Community was or controls, is owned or controlled by, or is under community. F.R. § 76.1200. Affiliated ETC's SAC See Attached For purposes of this filing, an officer is an occurrence of the similar legal document.	ng ETC, using page 4 and additional sheets if necessary. Affiliation shall be ications Act. That Section defines "affiliate" as "a person that (directly or indirectly) amon ownership or control with, another person." 47 U.S.C. § 153(2). See also 47

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial II

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
15	0	1	2	12

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
15	14	1	0	1

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Initial ___

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

	AND/OR
-	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on: Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

OR

2

Section 3: De-enroll Percentage

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

M = (F+K) Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or	N = (J+L) Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response	O = ((N ÷ M) * 100) Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
by USAC (This should equal the number reported in Block E)	or ineligibility	
15	1	6.67

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

No X

Is the ETC Pre-Paid?	Yes 🔲	
----------------------	-------	--

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block $\mathcal Q$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	
February	
March	
April	
May	
June	
July	
August	
September	
October	
November	
December	
Total Subscribers	

Signature Block

By signing below, I certify that the company listed above is in compliar procedures. I am an officer of the company named above. I am auth Study Area Code (SAC) listed above.	nce with all federal Lifeline certification orized to make this certification for the
Signed Signature of Officer Joel dohmeier@tdstelecom.com Email Address of Officer	Joel Dohmeier, Vice President Printed Name and Title of Officer January 27, 2016 Date 608,664,2415
Nicole Mauritz Person Completing This Certification Form	Contact Phone Number

SAC	Name
190217	Amelia Telephone Corporation
300585	Arcadia Telephone Company
452171	Arizona Telephone Company
361350	Arvig Telephone Company
532404	Asotin Telephone Company (OR)
522404	Asotin Telephone Company (WA)
330844	Badger Telecom, LLC
330849	Black Earth Telephone Company, LLC.
220346	Blue Ridge Telephone Company
330851	Bonduel Telephone Company, LLC.
361362	Bridge Water Telephone Co.
330856	Burlington, Brighton & Wheatland Telephone Company, LLC
250284	Butler Telephone Company, Inc.
280448	Calhoun City Telephone Company, Inc.
220351	Camden Telephone and Telegraph Company, Inc.
320744	Camden Telephone Company, Inc.
330859	Central State Telephone Company, LLC
310685	Chatham Telephone Company
401698	Cleveland County Telephone Company, Inc.
100005	Cobbosseecontee Telephone Company
320776	Communications Corporation of Indiana
310672	Communications Corporation of Michigan
320809	Communications Corporation of Southern Indiana
290559	Concord Telephone Exchange, Inc
300607	Continental Telephone Company
401699	Decatur Telephone Company, Inc.
462184	Delta County Tele-Comm, Inc.
150089	Deposit Telephone Company, Inc.
330875	Dickeyville Telephone, LLC
330914	EastCoast Telecom of Wisconsin, LLC
150092	Edwards Telephone Company, Inc.
330880	The Farmers Telephone Company, LLC
330930	Grantland Telecom, LLC
100010	Hampden Telephone Company
542321	Happy Valley Telephone Company
100011	Hartland & St. Albans Telephone Company
123321	Hollis Telephone Company, Inc.
320777	The Home Telephone Company of Pittsboro, Inc.
320778	Home Telephone Company, Inc.
542322	Hornitos Telephone Company
290566	Humphreys County Telephone Company
310677	Island Telephone Company
120045	Kearsarge Telephone Company
361413	KMP d/b/a Mid-State Telephone Company
260411	Leslie County Telephone Company
522427	Lewis River Telephone Company, Inc.
260412	Lewisport Telephone Co.
300613	Little Miami Communications Corporation

SAC	Name
140058	Ludlow Telephone Company
170183	Mahanoy & Mahantango Telephone Company
240533	McClellanville Telephone Company, Inc.
522430	McDaniel Telephone Company
320788	The Merchants and Farmers Telephone Company
120047	Merrimack County Telephone Company
432010	Mid-America Telephone, Inc.
330881	Mid-Plains Telephone, LLC
361433	Mid-State Telephone Company
330909	Midway Telephone Company, LLC
330917	Mt. Vernon Telephone Company, LLC
330915	Mosinee Telehphone Company
287449	Myrtle Telephone Company, Inc.
220375	Nelson-Ball Ground Telephone Company
193029	New Castle Telephone Co.
140061	Northfield Telephone Company
240535	Norway Telephone Co. Inc
250311	Oakman Telephone Company, Inc.
300645	Oakwood Telephone Company
431984	Oklahoma Communication Systems, Inc.
150114	Oriskany Falls Telephone Corporation
250314	Peoples Telephone Company, Inc.
140062	Perkinsville Telephone Company, Inc.
150118	Port Byron Telephone Company
472230	Potlatch Telephone Company, Inc.
210338	Quincy Telephone Company (FL)
220338	Quincy Telephone Company (GA)
330943	Riverside Telecom, LLC
320816	S & W Telephone Company, Inc.
260417	Salem Telephone Co.
330945	Scandinavia Telephone Company, LLC
310726	Shiawassee Telephone Company
100024	Somerset Telephone Company
283301	Southeast Mississippi Telephone Company, Inc.
330952	Southeast Telephone Co. of Wisconsin, LLC
452174	Southwestern Telephone Company
240544	St. Stephen Telephone Company
330955	State Long Distance Telephone Company
330954	Stockbridge & Sherwood Telephone Company, LLC
462207	Strasburg Telephone Company
170206	Sugar Valley Telephone Company
290578	Tellico Telephone Company, Inc.
290575	Tennessee Telephone Company
330958	Tenney Telephone Company, LLC
100007	The Island Telephone Company
300662	The Vanlue Telephone Company
320829	Tipton Telephone Company, Inc.
150129	Township Telephone Company, Inc.

SAC	Name
320830	Tri-County Communications Corporation
120049	Union Telephone Company
330963	Utelco, LLC.
150133	Vernon Telephone Company, Inc.
190253	Virginia Telephone Company
100031	Warren Telephone Company
330968	Waunakee Telephone Company, LLC.
100034	The West Penobscot Telephone and Telegraph Company
320837	West Point Telephone Company
240551	Williston Telephone Company
120050	Wilton Telephone Company, Inc.
361507	Winsted Telephone Company
542323	Winterhaven Telephone Company
310738	Wolverine Telephone Company
432034	Wyandotte Telephone Company
109002	U.S. Cellular
239006	Wilmington Cellular Telephone Company
239006	Jacksonville Cellular Telephone Company
209005	Hardy Cellular Telephone Company
359016	Farmers Cellular Telephone Company, Inc.
359016	Iowa RSA No. 12 Limited Partnership
	McDaniel Cellular Telephone Company
529001	USCOC of Oregon RSA #5, Inc.
539002	USCOC of Washington-4, Inc.
529001	Iowa RSA No.9 Limited Partnership
359016	United States Cellular Operating Company, LLC
339007	Kenosha Cellular Telephone, L.P.
339007	Madison Cellular Telephone Company
339007	Maine RSA #1, Inc.
109002	Maine RSA #1, Inc.
109002	NH #1 Rural Cellular, Inc.
129002	The second secon
539002	Oregon RSA #2, Inc. (OR)
529001	Oregon RSA #2, Inc. (WA) PCS Wisconsin, LLC
339007	
339007	Racine Cellular Telephone Company
109002	Bangor Cellular Telephone, L.P.
359016	Cedar Rapids Cellular Telephone, L.P. United States Cellular Operating Company of Chicago, LLC
349007	United States Cellular Operating Company of Chicago, ELC
359016	Dubuque Cellular Telephone, L.P.
299010	United States Cellular Operating Company of Knoxville
299010	Tennessee RSA No. 3 Limited Partnership
299010	United States Cellular Telephone Company (Greater Knoxville), LP.
539002	United States Cellular Operating Company of Medford
529001	Yakima MSA Limited Partnership
349007	USCOC of Central Illinois, LLC
359016	USCOC of Greater Iowa, LLC (IA)
349007	USCOC of Greater Iowa, LLC (IL)

SAC	Name		
379019	USCOC of Greater Iowa, LLC (NE)	USCOC of Greater Iowa, LLC (NE)	
349007	USCOC of Greater Missouri, LLC (IL)	USCOC of Greater Missouri, LLC (IL)	
429007	USCOC of Greater Missouri, LLC (MO)		
239006	USCOC of Greater North Carolina, LLC		
439004	USCOC of Greater Oklahoma, LLC		
339007	USCOC of LaCrosse, LLC		
419012	USCOC Nebraska/Kansas, LLC (KS)		
379019	USCOC Nebraska/Kansas, LLC (NE)		
529001	USCOC of Richland, Inc.		
439004	Texahoma Cellular LP		
199004	USCOC of Virginia RSA #3, Inc.		
529001	Western Sub-RSA Limited Partnership		
159014	St. Lawrence Seaway RSA Cellular Partnership	St. Lawrence Seaway RSA Cellular Partnership	
159015	New York RSA 2 Cellular	New York RSA 2 Cellular	
542343	Volcano Communications Company	Volcano Communications Company	

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

240535	
Study Area Code (SAC)	and the second of the second o
(An Eligible Telecommunications Carrier (ETC) must provide a ce	ertification form for each SAC through which it provides Lifeline service).
South Carolina	Norway Telephone Co.
State	ETC Name
TDS Telecom; TDS	TDS Telecommunications Corporation
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs? Provide a list of all ETCs that are affiliated with the reporting ETC, determined in accordance with Section 3(2) of the Communications owns or controls, is owned or controlled by, or is under common ow C.F.R. § 76.1200.	Yes No
Affiliated ETC's SAC	Affiliated ETC's Name
See Attached	
formation, or other similar legal document. An officer i	of a position listed in the article of incorporation, articles of is a person who occupies a position specified in the corporate by-president, vice president for operations, vice president for finance, there is a sole proprietorship, the owner must sign the certification.

Section 1: Initial Certification All ETCs must complete this section

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
19	0	0	3	16

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
17	15	3	1	4

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

	ANDIOR	
B.)	I certify that the company listed above has procedures in place	to recertify consumer eligibility by relying on:
	(List database or name of administrator here)	. Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named a	above. I am authorized to make this certification for the
	SAC listed above.	
	Initial	

AND/OD

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

OR

Initial _____

Section 3: De-enroll Percentage

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
17	4	23.53

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

	_			
Ιę	the	FTC	Pre-Paid?	

Yes

No X

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	- 100
February	
March	
April	
May	
June	
July	
August	
September	
October	
November	
December	
Total Subscribers	

Signature Block

By signing below, I certify that the company listed above procedures. I am an officer of the company named above Study Area Code (SAC) listed above.	is in compliance with all federal Lifeline certification re. I am authorized to make this certification for the
Signed John Signatury of Officer	Joel Dohmeier, Vice President Printed Name and Title of Officer
Joel dohmeier@tdstelecom.com Email Address of Officer	January 27, 2016 Date
Nicole Mauritz Person Completing This Certification Form	608.664.2415 Contact Phone Number

SAC	Name
190217	Amelia Telephone Corporation
300585	Arcadia Telephone Company
452171	Arizona Telephone Company
361350	Arvig Telephone Company
532404	Asotin Telephone Company (OR)
522404	Asotin Telephone Company (WA)
330844	Badger Telecom, LLC
330849	Black Earth Telephone Company, LLC.
220346	Blue Ridge Telephone Company
330851	Bonduel Telephone Company, LLC.
361362	Bridge Water Telephone Co.
330856	Burlington, Brighton & Wheatland Telephone Company, LLC
250284	Butler Telephone Company, Inc.
280448	Calhoun City Telephone Company, Inc.
220351	Camden Telephone and Telegraph Company, Inc.
320744	Camden Telephone Company, Inc.
330859	Central State Telephone Company, LLC
310685	Chatham Telephone Company
401698	Cleveland County Telephone Company, Inc.
100005	Cobbosseecontee Telephone Company
320776	Communications Corporation of Indiana
310672	Communications Corporation of Michigan
320809	Communications Corporation of Southern Indiana
290559	Concord Telephone Exchange, Inc
300607	Continental Telephone Company
401699	Decatur Telephone Company, Inc.
462184	Delta County Tele-Comm, Inc.
150089	Deposit Telephone Company, Inc.
330875	Dickeyville Telephone, LLC
330914	EastCoast Telecom of Wisconsin, LLC
150092	Edwards Telephone Company, Inc.
330880	The Farmers Telephone Company, LLC
330930	Grantland Telecom, LLC
100010	Hampden Telephone Company
542321	Happy Valley Telephone Company
100011	Hartland & St. Albans Telephone Company
123321	Hollis Telephone Company, Inc.
320777	The Home Telephone Company of Pittsboro, Inc.
320778	Home Telephone Company, Inc.
542322	Hornitos Telephone Company
290566	Humphreys County Telephone Company
310677	Island Telephone Company
120045	Kearsarge Telephone Company
361413	KMP d/b/a Mid-State Telephone Company
260411	Leslie County Telephone Company
522427	Lewis River Telephone Company, Inc.
260412	Lewisport Telephone Co.
300613	Little Miami Communications Corporation

SAC	Name	
140058	Ludlow Telephone Company	
170183	Mahanoy & Mahantango Telephone Company	
240533	McClellanville Telephone Company, Inc.	
522430	McDaniel Telephone Company	
320788	The Merchants and Farmers Telephone Company	
120047	Merrimack County Telephone Company	
432010	Mid-America Telephone, Inc.	
330881	Mid-Plains Telephone, LLC	
361433	Mid-State Telephone Company	
330909	Midway Telephone Company, LLC	
330917	Mt. Vernon Telephone Company, LLC	
330915	Mosinee Telehphone Company	
287449	Myrtle Telephone Company, Inc.	
220375	Nelson-Ball Ground Telephone Company	
193029	New Castle Telephone Co.	
140061	Northfield Telephone Company	
240535	Norway Telephone Co. Inc	
250311	Oakman Telephone Company, Inc.	
300645	Oakwood Telephone Company	
431984	Oklahoma Communication Systems, Inc.	
150114	Oriskany Falls Telephone Corporation	
250314	Peoples Telephone Company, Inc.	
140062	Perkinsville Telephone Company, Inc.	
150118	Port Byron Telephone Company	
472230	Potlatch Telephone Company, Inc.	
210338	Quincy Telephone Company (FL)	
220338	Quincy Telephone Company (GA)	
330943	Riverside Telecom, LLC	
320816	S & W Telephone Company, Inc.	
260417	Salem Telephone Co.	
330945	Scandinavia Telephone Company, LLC	
310726	Shiawassee Telephone Company	
100024	Somerset Telephone Company	
283301	Southeast Mississippi Telephone Company, Inc.	
330952	Southeast Telephone Co. of Wisconsin, LLC	
452174	Southwestern Telephone Company	
240544	St. Stephen Telephone Company	
330955	State Long Distance Telephone Company	
330954	Stockbridge & Sherwood Telephone Company, LLC	
462207	Strasburg Telephone Company	
170206	Sugar Valley Telephone Company	
290578	Tellico Telephone Company, Inc.	
290575	Tennessee Telephone Company	
330958	Tenney Telephone Company, LLC	
100007	The Island Telephone Company	
300662	The Vanlue Telephone Company	
320829	Tipton Telephone Company, Inc.	
150129	Township Telephone Company, Inc.	

Name
Tri-County Communications Corporation
Union Telephone Company
Utelco, LLC.
Vernon Telephone Company, Inc.
Virginia Telephone Company
Warren Telephone Company
Waunakee Telephone Company, LLC.
The West Penobscot Telephone and Telegraph Company
West Point Telephone Company
Williston Telephone Company
Wilton Telephone Company, Inc.
Winsted Telephone Company
Winterhaven Telephone Company
Wolverine Telephone Company
Wyandotte Telephone Company
U.S. Cellular
Wilmington Cellular Telephone Company
Jacksonville Cellular Telephone Company
Hardy Cellular Telephone Company
Farmers Cellular Telephone Company, Inc.
Iowa RSA No. 12 Limited Partnership
McDaniel Cellular Telephone Company
USCOC of Oregon RSA #5, Inc.
USCOC of Washington-4, Inc.
Iowa RSA No.9 Limited Partnership
United States Cellular Operating Company, LLC
Kenosha Cellular Telephone, L.P.
Madison Cellular Telephone Company
Maine RSA #1, Inc.
Maine RSA #4, Inc.
NH #1 Rural Cellular, Inc.
Oregon RSA #2, Inc. (OR)
Oregon RSA #2, Inc. (WA)
PCS Wisconsin, LLC
Racine Cellular Telephone Company
Bangor Cellular Telephone, L.P.
Cedar Rapids Cellular Telephone, L.P.
United States Cellular Operating Company of Chicago, LLC
Dubuque Cellular Telephone, L.P.
United States Cellular Operating Company of Knoxville
Tennessee RSA No. 3 Limited Partnership
The Control of the Co
United States Cellular Telephone Company (Greater Knoxville), LP.
United States Cellular Operating Company of Medford
Yakima MSA Limited Partnership
USCOC of Central Illinois, LLC
USCOC of Greater Iowa, LLC (IA)

SAC	Name
379019	USCOC of Greater Iowa, LLC (NE)
349007	USCOC of Greater Missouri, LLC (IL)
429007	USCOC of Greater Missouri, LLC (MO)
239006	USCOC of Greater North Carolina, LLC
439004	USCOC of Greater Oklahoma, LLC
339007	USCOC of LaCrosse, LLC
419012	USCOC Nebraska/Kansas, LLC (KS)
379019	USCOC Nebraska/Kansas, LLC (NE)
529001	USCOC of Richland, Inc.
439004	Texahoma Cellular LP
199004	USCOC of Virginia RSA #3, Inc.
529001	Western Sub-RSA Limited Partnership
159014	St. Lawrence Seaway RSA Cellular Partnership
159015	New York RSA 2 Cellular
542343	Volcano Communications Company

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

240536	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a contract of the communications are contracted as the contract of the contra	certification form for each SAC through which it provides Lifeline service).
SC	Palmetto Rural Telephone Cooperative Inc.
State	ETC Name
PRTC	Palmetto Rural Telephone Cooperative
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No No
determined in accordance with Section 3(2) of the Communication	C, using page 4 and additional sheets if necessary. Affiliation shall be s Act. That Section defines "affiliate" as "a person that (directly or indirectly) we will need to be supported by the second with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
See attached worksheet	
formation, or other similar legal document. An officer laws (or partnership agreement), and would typically be	at of a position listed in the article of incorporation, articles of is a person who occupies a position specified in the corporate by president, vice president for operations, vice president for finance filer is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	te this section
I certify that the company listed above has certification p	procedures in place to:
A) Review income and program-based eligibility documentat, to the best of my knowledge, the company income and/or program-based eligibility prior to his elementation.	mentation prior to enrolling a consumer in the Lifeline program, and was presented with documentation of each consumer's household or her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon according administrator prior to enrolling a consumer in	ess to a state database and/or notice of eligibility from the state in the Lifeline program.
I am an officer of the company named above. I am au above.	thorized to make this certification for the Study Area Code listed
Initial DJW	

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
638	0	152	00	486

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
3	3	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
483	285

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial DJW

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

USAC

Results are provided in the chart above in
Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
SAC listed above.

Initial DJW

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial DJW

Section 3: **De-enroll Percentage**

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

M = (F+K) Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number	N = (J+L) Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	O = ((N ÷ M) * 100) Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
(This should equal the number reported in Block E)		
486	285	58.65%

Pre-Paid ETCs Section 4:

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes O

No O

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block $\mathcal Q$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed, Certified Online

Signature of Officer

dewaine.wilson@prtc.coop

Email Address of Officer

Valerie Ancrum

Person Completing This Certification Form

Dewaine J Wilson, CFO

Printed Name and Title of Officer

01/08/2016

Date

843-538-9383

Contact Phone Number

SAC	Name
249023	Palmetto Telephone Communications
21//023	

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

249023	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a cer	rtification form for each SAC through which it provides Lifeline service).
SC	Palmetto Telephone Communications
State	ETC Name
PTC	Palmetto Rural Telephone Cooperative
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No No
Provide a list of all ETCs that are affiliated with the reporting ETC, letermined in accordance with Section 3(2) of the Communications is owns or controls, is owned or controlled by, or is under common own C.F.R. § 76.1200.	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
- See attached worksheet	
formation, or other similar legal document. An officer is	of a position listed in the article of incorporation, articles of s a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	this section
certify that the company listed above has certification pro	ocedures in place to:
A) Review income and program-based eligibility docume that, to the best of my knowledge, the company wa income and/or program-based eligibility prior to his or	ntation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon acces Lifeline administrator prior to enrolling a consumer in	s to a state database and/or notice of eligibility from the state the Lifeline program.
am an officer of the company named above. I am authabove.	norized to make this certification for the Study Area Code listed
Initial DJW	

Annual Recertification Section 2:

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
128	0	48	0	80

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
80	40

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial DJW

Initial DJW

AND/OR

- B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on: _. Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above. Initial DJW
- C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Section 3: De-enroll Percentage

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

M = (F+K) Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or	N = (J+L) Number of subscribers de- enrolled or scheduled to be de- enrolled as a	$O = ((N \div M) * 100)$ Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response	
(This should equal the number reported in Block E)	or ineligibility		
80	40	50.0%	

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 🔘

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block $\mathcal Q$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Certified Online

Signature of Officer

dewaine.wilson@prtc.coop

Email Address of Officer

Valerie Ancrum

Person Completing This Certification Form

Dewaine J Wilson, CFO

Printed Name and Title of Officer
01/08/2016
Date
843-538-9383
Contact Phone Number

SAC	Name
240536	Palmetto Rural Telephone Cooperative Inc.
a 1000	
=======================================	

Annual Lifeline Eligible Telecommunications Carrier Certification Form

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

240538	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a co	ertification form for each SAC through which it provides Lifeline service).
SC	Piedmont Rural Telephone Cooperative Inc.
State	ETC Name
N/A	N/A
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes O No O
determined in accordance with Section 3(2) of the Communications	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) wnership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
formation, or other similar legal document. An officer laws (or partnership agreement), and would typically be	of a position listed in the article of incorporation, articles of is a person who occupies a position specified in the corporate by-president, vice president for operations, vice president for finance, ler is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete	this section
Certify that the company listed above has certification pro-	rocedures in place to:
A) Review income and program-based eligibility docume that, to the best of my knowledge, the company w income and/or program-based eligibility prior to his o	entation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household r her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon acce Lifeline administrator prior to enrolling a consumer in	ss to a state database and/or notice of eligibility from the state a the Lifeline program.
I am an officer of the company named above. I am aut above.	horized to make this certification for the Study Area Code listed
Initial KEH	

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
62	0	5	2	55

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
55	33

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block

Certification:

Initial _____

Initial

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

ŕ	I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.
	above.

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

USAC

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial KEH

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
55	33	60.0%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes 🖸

No 🔘

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,
Certified Online
Signature of Officer
karah@prtcom.com
Email Address of Officer
Brandi Martin
Person Completing This Certification Form

Kara Horner, Controller

Printed Name and Title of Officer
01/13/2016
Date
864-683-3730
Contact Phone Number

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

240539	
Study Area Code (SAC)	
(An Eligible Telecommunications Carrier (ETC) must provide	e a certification form for each SAC through which it provides Lifeline service).
sc sc	PBT Telecom, Inc.
State	ETC Name
Comporium	Comporium
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
etermined in accordance with Section 3(2) of the Communication	Es? Yes X No ETC, using page 4 and additional sheets if necessary. Affiliation shall be tions Act. That Section defines "affiliate" as "a person that (directly or indirectly) on ownership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
See Attached Worksheet	See Attached Worksheet

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate bylaws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Section 1: Initial Certification All ETCs must complete this section

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial 2051

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
398	0		118	280

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
280	204	76	7	83

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Initial __

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:				
,	(List database or name of administrator here) . Results are provided in the chart above in				
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the				
	SAC listed above.				
	Initial				

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

M = (F + K)	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
280	83	29%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

_	4.98	~	_	-		_
ls	the	ETC	Pre-	·Pa	id	7

Yes No X

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

ح. ١١. ٢

Signature of Office

ben.spearman@comporium.com

Email Address of Officer

L.B. Spearman

Person Completing This Certification Form

L.B. Spearman, VicePresident

Printed Name and Title of Officer

January 25, 2016

Date

803.210.5528

Contact Phone Number

SAC	Name
240531	Lancaster Telephone Company PBT Telecom, Inc. Fort Mill Telephone Company Comporium, Inc.
240539	PBT Telecom, Inc.
240539 240521	Fort Mill Telephone Company
240542	Comporium, Inc.
210312	
1	

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

240541	
Study Area Code (SAC) (An Eligible Telecommunications Carrier (ETC) must provide a ce	rtification form for each SAC through which it provides Lifeline service).
SC	Ridgeway Telephone Company
State	ETC Name
TruVista	Chester Telephone Company
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Does the reporting company have affiliated ETCs?	Yes No O
Provide a list of all ETCs that are affiliated with the reporting ETC, determined in accordance with Section 3(2) of the Communications towns or controls, is owned or controlled by, or is under common own C.F.R. § 76.1200.	using page 4 and additional sheets if necessary. Affiliation shall be Act. That Section defines "affiliate" as "a person that (directly or indirectly) nership or control with, another person." 47 U.S.C. § 153(2). See also 47
Affiliated ETC's SAC	Affiliated ETC's Name
See attached worksheet	
formation, or other similar legal document. An officer is laws (or partnership agreement), and would typically be r	of a position listed in the article of incorporation, articles of a person who occupies a position specified in the corporate by- president, vice president for operations, vice president for finance, er is a sole proprietorship, the owner must sign the certification.
Section 1: Initial Certification All ETCs must complete to	this section
I certify that the company listed above has certification pro	ocedures in place to:
A) Review income and program-based eligibility document that, to the best of my knowledge, the company wa income and/or program-based eligibility prior to his or	ntation prior to enrolling a consumer in the Lifeline program, and as presented with documentation of each consumer's household her enrollment in Lifeline; and/or
B) Confirm consumer eligibility by relying upon access Lifeline administrator prior to enrolling a consumer in	s to a state database and/or notice of eligibility from the state the Lifeline program.
I am an officer of the company named above. I am auth above.	orized to make this certification for the Study Area Code listed
Initial	

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
7	0	0	1	6

Recertification Results:

F	G	H = (F-G)	[J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
6	1	5	0	5

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block F

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial TTH

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

ln	itia	L	

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
6	5	83.34%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes O

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Certified Online
Signature of Officer
tharper@truvista.biz
Email Address of Officer
Swonda M. Dixon

Person Completing This Certification Form

Thomas T. Harper / VP-Administration & Regulatory Affairs

Printed Name and Title of Officer 01/27/2016

Date

803-581-9164

Contact Phone Number

SAC	Name
240516	Chester Telephone Company
210010	

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST Deadline: January 31st (Annually)

Sandhill Telephone Cooperative Inc. ETC Name N/A Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Sandhill Telephone Cooperative Inc. ETC Name N/A Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
ETC Name N/A Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
N/A Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
(If same as ETC name, list "N/A" Do not leave blank)
Yes No No log No loge 4 and additional sheets if necessary. Affiliation shall be t Section defines "affiliate" as "a person that (directly or indirectly) or control with, another person." 47 U.S.C. § 153(2). See also 47
ated ETC's Name
position listed in the article of incorporation, articles of son who occupies a position specified in the corporate by- nt, vice president for operations, vice president for finance, sole proprietorship, the owner must sign the certification.
ion
es in place to:
prior to enrolling a consumer in the Lifeline program, and ented with documentation of each consumer's household rollment in Lifeline; and/or
state database and/or notice of eligibility from the state celine program.
to make this certification for the Study Area Code listed

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	C	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
322	0	53	0	269

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
269	126

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____

Initial

AND/OR

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
	. Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial CLC

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
269	126	46.85%

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes O

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Certified Online
Signature of Officer

lee.chambers@shtc.net
Email Address of Officer

Jeanne K Oliver

Person Completing This Certification Form

Christopher L Chambers, CEO/General Manager

Printed Name and Title of Officer
01/27/2016

Date
843-658-6845

Contact Phone Number

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

certification form for each SAC through which it provides Lifeline service). St. Stephen Telephone Co.
ETC Name
TDS Telecommunications Corporation
Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)
C, using page 4 and additional sheets if necessary. Affiliation shall be as Act. That Section defines "affiliate" as "a person that (directly or indirect ownership or control with, another person." 47 U.S.C. § 153(2). See also 47
is Act. That Section defines "affiliate" as a person that (directly or that ect
is Act. That Section defines "affiliate" as "a person that (directly or indirect ownership or control with, another person." 47 U.S.C. § 153(2). See also 47

Initial Certification All ETCs must complete this section Section 1:

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
60	0	0	1	59

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- curolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
64	49	15	0	15

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block F

Certification:

Initial _

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
,	Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial

AND/OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

OR

2

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

M = (F+K)	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
64	15	23.44

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

No X

Is the ETC Pre-Paid?	Yes
----------------------	-----

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	
February	
March	
April	
May	
June	
July	
August	
September	
October	
November	
December	
Total Subscribers	

Signature Block

By signing below, I certify that the company listed procedures. I am an officer of the company name Study Area Code (SAC) listed above.	above is in compliance with all federal Lifeline certification ed above. I am authorized to make this certification for the
Signature of Officer Joel dohmeier@tdstelecom.com Email Address of Officer	Joel Dohmeier, Vice President Printed Name and Title of Officer January 27, 2016 Date
Nicole Mauritz Person Completing This Certification Form	608.664.2415 Contact Phone Number

SAC	Name
190217	Amelia Telephone Corporation
300585	Arcadia Telephone Company
452171	Arizona Telephone Company
361350	Arvig Telephone Company
532404	Asotin Telephone Company (OR)
522404	Asotin Telephone Company (WA)
330844	Badger Telecom, LLC
330849	Black Earth Telephone Company, LLC.
220346	Blue Ridge Telephone Company
330851	Bonduel Telephone Company, LLC.
361362	Bridge Water Telephone Co.
330856	Burlington, Brighton & Wheatland Telephone Company, LLC
250284	Butler Telephone Company, Inc.
280448	Calhoun City Telephone Company, Inc.
220351	Camden Telephone and Telegraph Company, Inc.
320744	Camden Telephone Company, Inc.
330859	Central State Telephone Company, LLC
310685	Chatham Telephone Company
401698	Cleveland County Telephone Company, Inc.
100005	Cobbosseecontee Telephone Company
320776	Communications Corporation of Indiana
310672	Communications Corporation of Michigan
320809	Communications Corporation of Southern Indiana
290559	Concord Telephone Exchange, Inc
300607	Continental Telephone Company
401699	Decatur Telephone Company, Inc.
462184	Delta County Tele-Comm, Inc.
150089	Deposit Telephone Company, Inc.
330875	Dickeyville Telephone, LLC
330914	EastCoast Telecom of Wisconsin, LLC
150092	Edwards Telephone Company, Inc.
330880	The Farmers Telephone Company, LLC
330930	Grantland Telecom, LLC
100010	Hampden Telephone Company
542321	Happy Valley Telephone Company
100011	Hartland & St. Albans Telephone Company
123321	Hollis Telephone Company, Inc.
320777	The Home Telephone Company of Pittsboro, Inc.
320778	Home Telephone Company, Inc.
542322	Hornitos Telephone Company
290566	Humphreys County Telephone Company
310677	Island Telephone Company
120045	Kearsarge Telephone Company
361413	KMP d/b/a Mid-State Telephone Company
260411	Leslie County Telephone Company
522427	Lewis River Telephone Company, Inc.
260412	Lewisport Telephone Co.
300613	Little Miami Communications Corporation

SAC	Name
140058	Ludlow Telephone Company
170183	Mahanoy & Mahantango Telephone Company
240533	McClellanville Telephone Company, Inc.
522430	McDaniel Telephone Company
320788	The Merchants and Farmers Telephone Company
120047	Merrimack County Telephone Company
432010	Mid-America Telephone, Inc.
330881	Mid-Plains Telephone, LLC
361433	Mid-State Telephone Company
330909	Midway Telephone Company, LLC
330917	Mt. Vernon Telephone Company, LLC
330915	Mosinee Telehphone Company
287449	Myrtle Telephone Company, Inc.
220375	Nelson-Ball Ground Telephone Company
193029	New Castle Telephone Co.
140061	Northfield Telephone Company
240535	Norway Telephone Co. Inc
250311	Oakman Telephone Company, Inc.
300645	Oakwood Telephone Company
431984	Oklahoma Communication Systems, Inc.
150114	Oriskany Falls Telephone Corporation
250314	Peoples Telephone Company, Inc.
140062	Perkinsville Telephone Company, Inc.
150118	Port Byron Telephone Company
472230	Potlatch Telephone Company, Inc.
210338	Quincy Telephone Company (FL)
220338	Quincy Telephone Company (GA)
330943	Riverside Telecom, LLC
320816	S & W Telephone Company, Inc.
260417	Salem Telephone Co.
330945	Scandinavia Telephone Company, LLC
310726	Shiawassee Telephone Company
100024	Somerset Telephone Company
283301	Southeast Mississippi Telephone Company, Inc.
330952	Southeast Telephone Co. of Wisconsin, LLC
452174	Southwestern Telephone Company
240544	St. Stephen Telephone Company
330955	State Long Distance Telephone Company
330954	Stockbridge & Sherwood Telephone Company, LLC
462207	Strasburg Telephone Company
170206	Sugar Valley Telephone Company
290578	Tellico Telephone Company, Inc.
290575	Tennessee Telephone Company
330958	Tenney Telephone Company, LLC
100007	The Island Telephone Company
300662	The Vanlue Telephone Company
320829	Tipton Telephone Company, Inc.
150129	Township Telephone Company, Inc.

SAC	Name
320830	Tri-County Communications Corporation
120049	Union Telephone Company
330963	Utelco, LLC.
150133	Vernon Telephone Company, Inc.
190253	Virginia Telephone Company
100031	Warren Telephone Company
330968	Waunakee Telephone Company, LLC.
100034	The West Penobscot Telephone and Telegraph Company
320837	West Point Telephone Company
240551	Williston Telephone Company
120050	Wilton Telephone Company, Inc.
361507	Winsted Telephone Company
542323	Winterhaven Telephone Company
310738	Wolverine Telephone Company
432034	Wyandotte Telephone Company
109002	U.S. Cellular
239006	Wilmington Cellular Telephone Company
239006	Jacksonville Cellular Telephone Company
209005	Hardy Cellular Telephone Company
359016	Farmers Cellular Telephone Company, Inc.
359016	Iowa RSA No. 12 Limited Partnership
529001	McDaniel Cellular Telephone Company
539002	USCOC of Oregon RSA #5, Inc.
529001	USCOC of Washington-4, Inc.
359016	Iowa RSA No.9 Limited Partnership
339007	United States Cellular Operating Company, LLC
339007	Kenosha Cellular Telephone, L.P.
339007	Madison Cellular Telephone Company
109002	Maine RSA #1, Inc.
109002	Maine RSA #4, Inc.
129002	NH #1 Rural Cellular, Inc.
539002	Oregon RSA #2, Inc. (OR)
529001	Oregon RSA #2, Inc. (WA)
339007	PCS Wisconsin, LLC
339007	Racine Cellular Telephone Company
109002	Bangor Cellular Telephone, L.P.
359016	Cedar Rapids Cellular Telephone, L.P.
349007	United States Cellular Operating Company of Chicago, LLC
359016	Dubuque Cellular Telephone, L.P.
299010	United States Cellular Operating Company of Knoxville
299010	Tennessee RSA No. 3 Limited Partnership
299010	United States Cellular Telephone Company (Greater Knoxville), LP.
539002	United States Cellular Operating Company of Medford
529001	Yakima MSA Limited Partnership
349007	USCOC of Central Illinois, LLC
359016	USCOC of Greater Iowa, LLC (IA)
349007	USCOC of Greater Iowa, LLC (IL)

SAC	Name
379019	USCOC of Greater Iowa, LLC (NE)
349007	USCOC of Greater Missouri, LLC (IL)
429007	USCOC of Greater Missouri, LLC (MO)
239006	USCOC of Greater North Carolina, LLC
439004	USCOC of Greater Oklahoma, LLC
339007	USCOC of LaCrosse, LLC
419012	USCOC Nebraska/Kansas, LLC (KS)
379019	USCOC Nebraska/Kansas, LLC (NE)
529001	USCOC of Richland, Inc.
439004	Texahoma Cellular LP
199004	USCOC of Virginia RSA #3, Inc.
529001	Western Sub-RSA Limited Partnership
159014	St. Lawrence Seaway RSA Cellular Partnership
159015	New York RSA 2 Cellular
542343	Volcano Communications Company

All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

SC	West Carolina Rural Telephone Cooperative Inc	
State	ETC Name	
WCTEL	'N/A'	
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name	
s the reporting company have affiliated l		
es the reporting company have affiliated I		

laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Section 1: Initial Certification All ETCs must complete this section

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial	LT	

Section 2: Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wireline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
116	0	22	4	90

Recertification Results:

F	G	H = (F-G)	1	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
0	0	0	0	0

K	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
90	27

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block E.

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial LT

AND/OR

B.) I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:

USAC

Results are provided in the chart above in Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial LT

OR

C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) \star 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
90	27	30.0%

Section 4: **Pre-Paid ETCs**

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

Is the ETC Pre-Paid?

Yes O

No 👩

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed

Certified Online

Signature of Officer

lance.tade@wctel.com

Email Address of Officer

Kerri Hall

Person Completing This Certification Form

Lance Tade, CFO

Printed Name and Title of Officer

01/20/2016

Date

864-446-9269

Contact Phone Number

All carriers must complete all or portions of all sections
Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

South Carolina	de a certification form for each SAC through which it provides Lifeline service). Williston Telephone Co.	
State	ETC Name	
TDS Telecom; TDS	TDS Telecommunications Corporation	
DBA, Marketing or Other Branding Name (If same as ETC name, list "N/A" Do not leave blank)	Holding Company Name (If same as ETC name, list "N/A" Do not leave blank)	
town in d in a sound man with Section 3(2) of the Communice	g ETC, using page 4 and additional sheets if necessary. Affiliation shall be	
ovide a list of all ETCs that are affiliated with the reporting	g ETC, using page 4 and additional sheets if necessary. Affiliation shall be	
ovide a list of all ETCs that are affiliated with the reporting termined in accordance with Section 3(2) of the Communicates or controls, is owned or controlled by, or is under communicates. § 76.1200.	g ETC, using page 4 and additional sheets if necessary. Affiliation shall be ations Act. That Section defines "affiliate" as "a person that (directly or indirect non ownership or control with, another person." 47 U.S.C. § 153(2). See also 47	

Section 1: Initial Certification All ETCs must complete this section

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

Initial I

Annual Recertification Section 2:

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

A	В	С	D	$\mathbf{E} = (\mathbf{A} - \mathbf{B} - \mathbf{C} - \mathbf{D})$
Number of subscribers claimed on February FCC Form 497 of current Form 555 calendar year (February data month)	Number of lines claimed on February FCC Form 497 of current Form 555 calendar year provided to wircline resellers	Number of subscribers claimed on the February FCC Form 497 that were initially enrolled in the current Form 555 calendar year (These subscribers did not have Lifeline service prior to January 1 of the current 555 calendar year.)	Number of subscribers de-enrolled <u>prior</u> to recertification attempt by either the ETC, a state administrator, access to an eligibility database, or by USAC	Number of subscribers ETC is responsible for recertifying for current Form 555 calendar year
53	0	0	8	45

Recertification Results:

F	G	H = (F-G)	I	J = (H+I)
Number of subscribers ETC contacted directly to recertify eligibility through attestation	Number of subscribers responding to ETC contact	Number of non- responding subscribers	Number of subscribers responding that they are no longer eligible (This should be a subset of Block G.)	Number of subscribers de- enrolled or scheduled to be de-enrolled as a result of non-response or response of ineligibility from ETC recertification attempt
45	33	12	1	13

К	L
Number of subscribers whose eligibility was reviewed by state administrator, ETC access to eligibility database, or by USAC	Number of subscribers de-enrolled or scheduled to be de-enrolled as a result of finding of ineligibility by state administrator, ETC access to eligibility database, or USAC
0	0

Note: If any subscriber was reviewed by an ETC accessing a state database or by a state administrator and subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in Blocks F through J as appropriate and not in Blocks K and L. As a result, all subscribers subject to recertification who were not de-enrolled prior to the recertification attempt must be accounted for in Block F or Block K.

The total of Block F and Block K should equal the number reported in Block

Certification:

Based on the data entered above, initial the certification(s) below that apply. Both Certification A and B may apply depending on the recertification procedures in place for the SAC reporting on this form. If Certification C applies, neither Certification A nor B may apply.

A.) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart above in Blocks F through J. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above. Initial =

	AND/UK
B.)	I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on:
	Results are provided in the chart above in
	Blocks K through L. I am an officer of the company named above. I am authorized to make this certification for the
	SAC listed above.
	Initial

LAUD/OD

OR C.) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial ___

Using the data entered in Section 2, complete the chart below to find the percentage of subscribers de-enrolled for this ETC.

$\mathbf{M} = (\mathbf{F} + \mathbf{K})$	N = (J+L)	$O = ((N \div M) * 100)$
Number of subscribers that the ETC attempted to recertify directly or through a state administrator, ETC access to a state database, or by USAC (This should equal the number reported in Block E)	Number of subscribers de- enrolled or scheduled to be de- enrolled as a result of non-response or ineligibility	Percentage of subscribers de-enrolled or scheduled to be de-enrolled as a result of ineligibility or non-response
45	13	28.89

Section 4: Pre-Paid ETCs

All ETCs must complete the appropriate check-box; pre-paid ETCs must complete all of Section 4. Pre-paid ETCs generally do not assess or collect a monthly fee from their Lifeline subscribers. ETCs that only assess a fee but do not collect such fees are pre-paid ETCs and must complete the chart below.

_		-	-	D 110	
18	the	KTC	Pre-	Paid?	

Yes	
1 00	

No X

If Yes, record the number of subscribers de-enrolled for non-usage by month in Block ${\it Q}$ below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	
February	
March	
April	
May	
June	
July	
August	
September	
October	
November	
December	
Total Subscribers	

Signature Block

By signing below, I certify that the company listed abordancedures. I am an officer of the company named a Study Area Code (SAC) listed above.	ove is in compliance with all federal Lifeline certification pove. I am authorized to make this certification for the
Signature of Officer	Joel Dohmeier, Vice President Printed Name and Title of Officer
Joel.dohmeier@tdstelecom.com Email Address of Officer	January 27, 2016 Date
Nicole Mauritz Person Completing This Certification Form	608.664.2415 Contact Phone Number

SAC	Name
190217	Amelia Telephone Corporation
300585	Arcadia Telephone Company
452171	Arizona Telephone Company
361350	Arvig Telephone Company
532404	Asotin Telephone Company (OR)
522404	Asotin Telephone Company (WA)
330844	Badger Telecom, LLC
330849	Black Earth Telephone Company, LLC.
220346	Blue Ridge Telephone Company
330851	Bonduel Telephone Company, LLC.
361362	Bridge Water Telephone Co.
330856	Burlington, Brighton & Wheatland Telephone Company, LLC
250284	Butler Telephone Company, Inc.
280448	Calhoun City Telephone Company, Inc.
220351	Camden Telephone and Telegraph Company, Inc.
320744	Camden Telephone Company, Inc.
330859	Central State Telephone Company, LLC
310685	Chatham Telephone Company
401698	Cleveland County Telephone Company, Inc.
100005	Cobbosseecontee Telephone Company
320776	Communications Corporation of Indiana
310672	Communications Corporation of Michigan
320809	Communications Corporation of Southern Indiana
290559	Concord Telephone Exchange, Inc
300607	Continental Telephone Company
401699	Decatur Telephone Company, Inc.
462184	Delta County Tele-Comm, Inc.
150089	Deposit Telephone Company, Inc.
330875	Dickeyville Telephone, LLC
330914	EastCoast Telecom of Wisconsin, LLC
150092	Edwards Telephone Company, Inc.
330880	The Farmers Telephone Company, LLC
330930	Grantland Telecom, LLC
100010	Hampden Telephone Company
542321	Happy Valley Telephone Company
100011	Hartland & St. Albans Telephone Company
123321	Hollis Telephone Company, Inc.
320777	The Home Telephone Company of Pittsboro, Inc.
320778	Home Telephone Company, Inc.
542322	Hornitos Telephone Company
290566	Humphreys County Telephone Company
310677	Island Telephone Company
120045	Kearsarge Telephone Company
361413	KMP d/b/a Mid-State Telephone Company
260411	Leslie County Telephone Company
522427	Lewis River Telephone Company, Inc.
260412	Lewisport Telephone Co.
300613	Little Miami Communications Corporation

SAC	Name
140058	Ludlow Telephone Company
170183	Mahanoy & Mahantango Telephone Company
240533	McClellanville Telephone Company, Inc.
522430	McDaniel Telephone Company
320788	The Merchants and Farmers Telephone Company
120047	Merrimack County Telephone Company
432010	Mid-America Telephone, Inc.
330881	Mid-Plains Telephone, LLC
361433	Mid-State Telephone Company
330909	Midway Telephone Company, LLC
330917	Mt. Vernon Telephone Company, LLC
330915	Mosinee Telehphone Company
287449	Myrtle Telephone Company, Inc.
220375	Nelson-Ball Ground Telephone Company
193029	New Castle Telephone Co.
140061	Northfield Telephone Company
240535	Norway Telephone Co. Inc
250311	Oakman Telephone Company, Inc.
300645	Oakwood Telephone Company
431984	Oklahoma Communication Systems, Inc.
150114	Oriskany Falls Telephone Corporation
250314	Peoples Telephone Company, Inc.
140062	Perkinsville Telephone Company, Inc.
150118	Port Byron Telephone Company
472230	Potlatch Telephone Company, Inc.
210338	Quincy Telephone Company (FL)
220338	Quincy Telephone Company (GA)
330943	Riverside Telecom, LLC
320816	S & W Telephone Company, Inc.
260417	Salem Telephone Co.
330945	Scandinavia Telephone Company, LLC
310726	Shiawassee Telephone Company
100024	Somerset Telephone Company
283301	Southeast Mississippi Telephone Company, Inc.
330952	Southeast Telephone Co. of Wisconsin, LLC
452174	Southwestern Telephone Company
240544	St. Stephen Telephone Company
330955	State Long Distance Telephone Company
330954	Stockbridge & Sherwood Telephone Company, LLC
462207	Strasburg Telephone Company
170206	Sugar Valley Telephone Company
290578	Tellico Telephone Company, Inc.
290575	Tennessee Telephone Company
330958	Tenney Telephone Company, LLC
100007	The Island Telephone Company
300662	The Vanlue Telephone Company
320829	Tipton Telephone Company, Inc.
150129	Township Telephone Company, Inc.

SAC	Name
320830	Tri-County Communications Corporation
120049	Union Telephone Company
330963	Utelco, LLC.
150133	Vernon Telephone Company, Inc.
190253	Virginia Telephone Company
100031	Warren Telephone Company
330968	Waunakee Telephone Company, LLC.
100034	The West Penobscot Telephone and Telegraph Company
320837	West Point Telephone Company
240551	Williston Telephone Company
120050	Wilton Telephone Company, Inc.
361507	Winsted Telephone Company
542323	Winterhaven Telephone Company
310738	Wolverine Telephone Company
432034	Wyandotte Telephone Company
109002	U.S. Cellular
239006	Wilmington Cellular Telephone Company
239006	Jacksonville Cellular Telephone Company
209005	Hardy Cellular Telephone Company
359016	Farmers Cellular Telephone Company, Inc.
359016	Iowa RSA No. 12 Limited Partnership
529001	McDaniel Cellular Telephone Company
539002	USCOC of Oregon RSA #5, Inc.
529001	USCOC of Washington-4, Inc.
359016	Iowa RSA No.9 Limited Partnership
339007	United States Cellular Operating Company, LLC
339007	Kenosha Cellular Telephone, L.P.
339007	Madison Cellular Telephone Company
109002	Maine RSA #1, Inc.
109002	Maine RSA #4, Inc.
129002	NH #1 Rural Cellular, Inc.
539002	Oregon RSA #2, Inc. (OR)
529001	Oregon RSA #2, Inc. (WA)
339007	PCS Wisconsin, LLC
339007	Racine Cellular Telephone Company
109002	Bangor Cellular Telephone, L.P.
359016	Cedar Rapids Cellular Telephone, L.P.
349007	United States Cellular Operating Company of Chicago, LLC
359016	Dubuque Cellular Telephone, L.P.
299010	United States Cellular Operating Company of Knoxville
299010	Tennessee RSA No. 3 Limited Partnership
299010	United States Cellular Telephone Company (Greater Knoxville), LP.
539002	United States Cellular Operating Company of Medford
529001	Yakima MSA Limited Partnership
349007	USCOC of Central Illinois, LLC
359016	USCOC of Greater Iowa, LLC (IA)
349007	USCOC of Greater Iowa, LLC (IL)
UTOUT	00000

SAC	Name	
379019	USCOC of Greater Iowa, LLC (NE)	
349007	USCOC of Greater Missouri, LLC (IL)	
429007	USCOC of Greater Missouri, LLC (MO)	
239006	USCOC of Greater North Carolina, LLC	
439004	USCOC of Greater Oklahoma, LLC	
339007	USCOC of LaCrosse, LLC	
419012	USCOC Nebraska/Kansas, LLC (KS)	
379019	USCOC Nebraska/Kansas, LLC (NE)	
529001	USCOC of Richland, Inc.	
439004	Texahoma Cellular LP	
199004	USCOC of Virginia RSA #3, Inc.	
529001	Western Sub-RSA Limited Partnership	
159014	St. Lawrence Seaway RSA Cellular Partnership	
159015	New York RSA 2 Cellular	
542343	Volcano Communications Company	